

SCHEDULE "T"
TRANSPORTER LICENSE*LEAVE BLANK – FOR ABC USE ONLY*

License # _____ \$ _____ Validating Number _____

License # _____ \$ _____ Validating Number _____

Malt Beverage Administrator's Approval _____ Date _____

Distilled Spirits Administrator's Approval _____ Date _____

(A)

Applicant's name(s) or company to be licensed _____

DBA (Name of Business) _____

Address of premises to be licensed _____

City _____ County _____ State _____ 9 digit zip code _____

Mailing address if different from above _____

Telephone () _____ Fax () _____ Other Phone () _____

Enter amount of fee enclosed \$ _____

List the type(s) of licenses(s) you are applying for _____

Enter the date you want this license to become effective (month) _____, (day) _____, (year) _____, through December 31st. (year) _____**(B)**

1. Complete the following for the business proprietor, partner(s) and all persons interested in the business to be licensed. List all owners, officers, directors, partners, managing members, members, and shareholders (unless publicly held). Show 100% of the ownership.
If additional space is needed, please make an attachment.

NAME AND ADDRESS	ALL PHONE NUMBERS H = HOME W = WORK F = FAX O = OTHER	SOCIAL SECURITY NUMBER	TITLE	USA CITIZEN	DATE OF BIRTH	LIST DATE & STATE WHERE YOU RESIDED IN PAST 5 YRS.	% OF OWNERSHIP
	H W F O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%
	H W F O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%
	H W F O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%

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(C)

- | | | | |
|-----|--|--------------------------|------------------------|
| 2. | Are you a commercial airline system, charter flight system, or a commercial cargo system company applying for an Air Transporter License ?
If yes, under KRS 243.050 (2)(3) list the storage location(s) if operating from more than one airport in Kentucky.
_____ | Yes | No |
| 3. | Are you a contract or common carrier for hire applying for a Liquor Transporter License ?
This license will authorize drop-offs, pick-ups and traveling through Kentucky.
If yes, under KRS 243.200 attach a copy of your certificate of authority to transport as a common carrier issued by the Department of Transportation Federal Motor Carrier Safety Administration. | Yes | No |
| 4. | Are you an out-of-state distiller, rectifier, vintner, wholesaler or distributor, applying for a Non-Resident Liquor Transporter License ?
If yes, attach a copy of your certificate of authority to transport as a common carrier issued by the Department of Transportation Federal Motor Carrier Safety Administration.
804 KAR 4:030 requires you to attach a corporate surety bond in the amount of \$2,500. Is your bond attached? | Yes | No |
| 5. | Are you applying for a Through Transporter Liquor License ?
If yes, list your ICC (Interstate Commerce Commission) number issued by the Kentucky Department of Transportation. _____. Attach a copy of your certificate of authority to transport as a common carrier issued by the Department of Transportation Federal Motor Carrier Safety Administration.
804 KAR 4:170 requires a Through Transporter to be a common carrier or a licensed vintner or distiller operating company owned trucks traveling over Kentucky highways. | Yes | No |
| 6. | Are you applying for a Liquor Freight Forwarder License ?
If yes, 804 KAR 4:180 will allow you to receive, hold, and ship distilled spirits and wine by common carriers who are licensed by this Office. | Yes | No |
| 7. | Are you a contract or common carrier for hire applying for a Malt Beverage (beer) Transporter License ?
Under KRS 243.210 this license will authorize drop-offs, pick-ups and traveling through Kentucky.
If yes, attach a copy of your certificate of authority to transport as a common carrier issued by the Department of Transportation Federal Motor Carrier Safety Administration. | Yes | No |
| 8. | Are you a beer distributor, wholesaler, or licensed transporter applying for a Special Beer Transporter License ?
If yes, 804 KAR 4:160 restricts transportation of malt beverages for export only through Kentucky.
List the type of license you hold _____ the state of issuance _____ the license number _____. | Yes | No |
| 9. | Do you understand that, if granted a license, authorized field representatives of the Ky. ABC Office may stop and examine cargo of any truck or vehicle in which distilled spirits, wine or malt beverages are being transported within the boundaries of the Commonwealth of Kentucky? | Yes | No |
| 10. | Is the entire license fee paid by the applicant and by no other person? | Yes | No |
| 11. | Does anyone named in this application have an interest in any kind of alcoholic beverage business or the premises of any alcoholic beverage business other than that for which you are herein applying?
If yes, describe the interest(s). _____. | Yes | No |
| 12. | a. Has the applicant or any person named in this application been convicted of any felony?
b. Has the applicant or any person named in this application been convicted of a misdemeanor, directly or indirectly, related to alcohol or a controlled substance?
If yes, to either question attach a statement giving a full explanation, including dates and convictions. | Yes
Yes | No
No |

(D)

AFFIDAVIT OF PERSON APPLYING FOR THE KENTUCKY ABC LICENSE(S)

I, __ (print your name here) _____, do hereby swear or affirm that all statements contained in this application and all its attachments are true and correct to the best of my knowledge, information and belief. I further agree that I shall not engage in any activity involving alcoholic beverages at the premises described herein until I have been issued the appropriate license(s) by the Department of Alcoholic Beverage Control. Once the license(s) is issued, I hereby swear or affirm that I shall abide by all state and local statutes, regulations, and ordinances relating to the manufacture, sale, use, and trafficking in alcoholic beverages. I also swear or affirm that no persons listed in Section D-7 of this application are in default of a repayment obligation, such as a student loan repayment, under any financial program administered by a Kentucky Higher Education Assistance Authority (KHEAA). KRS 164.772.

Signature of Applicant _____ **Title** _____ **Date** _____

Sworn or affirmed before me on this _____ **day of** _____, **year of** _____. **My commission expires** _____

Notary Public _____ **County of** _____, **State of** _____.
(Canadian applicants are exempt from this notary requirement)

SCHEDULE “T” TYPES OF LICENSES & FEES

Site ID #

Check ☐ the box(s) for the type(s) of license(s) you are applying for.

To determine the ABC State License(s) fee, find the license type(s) in the left column, and then move right across the table. Licenses issued 6 months or more pay a full year fee. Licenses issued less than 6 months pay one-half year fee.

Attach a certified check, cashier check, or a money order.

Make check payable to: **Kentucky State Treasurer**

WE DO NOT ACCEPT CASH!

LICENSE TYPE	PREFIX	✓	Jan. – June Pay this amount	July – Dec. Pay this amount
AIR TRANSPORTER (<i>liquor / wine / beer</i>) (airlines, charter flight, or commercial cargo systems) (Authorized under Kentucky Law = KRS 243.050(2) (3) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	AT	<input type="checkbox"/>	500.00	250.00
FREIGHT FORWARDER (<i>liquor / wine</i>) (Under Kentucky Law = 804 KAR 4:180) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	FF	<input type="checkbox"/>	100.00	50.00
MALT BEVERAGE TRANSPORTER (common carriers for hire) (Under Kentucky Law = KRS 243.210) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	MT	<input type="checkbox"/>	100.00	50.00
NON-RESIDENT TRANSPORTER (<i>liquor / wine</i>) (out-of-state distillers, rectifiers, vintners, or wholesalers) (Under Kentucky Law = 804 KAR 4:030) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	NRL	<input type="checkbox"/>	100.00	50.00
SPECIAL BEER TRANSPORTER (distributors, wholesalers, or licensed transporters) (Under Kentucky Law = 804 KAR 4:160) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	SMT	<input type="checkbox"/>	100.00	50.00
TRANSPORTER LIQUOR (<i>liquor / wine</i>) (common carriers for hire) (Under Kentucky Law = KRS 243.200) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	TS	<input type="checkbox"/>	100.00	50.00
THROUGH TRANSPORTER (<i>liquor / wine</i>) (vintners, distillers, or licensed common carriers) (Under Kentucky Law = 804 KAR 4:170) (804 KAR 8:050 requires all vehicles be marked with Ky. License Type & License Number)	TT	<input type="checkbox"/>	100.00	50.00
TOTALS				

804 KAR 8:050. Signs on vehicles used.

Governs the transportation of alcoholic beverages to make identification of vehicles transporting alcoholic beverages immediately recognizable to police officers and agents of this cabinet, this administrative regulation states, with particularity, the types of signs which must be placed on any vehicle used in transporting alcoholic beverages.

Section 1. (1) Signs required on trucks, wagons, and other vehicles used by distillers, retailers, rectifiers, vintners, wholesalers, brewers, distributors, and transporters, in transporting alcoholic beverages shall be:

(a) Painted or printed, or affixed magnetically or adhesively with letters in a color contrasting with the color of that portion of the truck or vehicle upon which the sign is placed;

(b) Placed upon the right and left windows or sides of the vehicle in uniform letters of not less than three (3) inches high in the following from:

"(Name of Licensee)

Ky. (type) License

No. _____"

(2) The following words, and no others, may be abbreviated: Kentucky, (Ky.); Wholesaler, (Whol.); Distiller, (Dist.); Rectifier, (Rect.); Vintner, (Vint.); Brewer, (Brew.); Distributor, (Distr.); Transporter, (TS, and or MT); Company, (Co.); Limited Liability Company, (LLC); Limited Liability Partnership, (LLP); Incorporated, (Inc.); Retailer, (Ret.); and Corporation, (Corp.) (ABC 8:50; 1 Ky.R. 845; eff. 5-14-75; 30 Ky.R. 1103; 1517; eff. 1-5-2004.)

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CHECK LIST

1. Have you answered each question fully and checked the type of licenses you are applying for? ☐ Yes ☐ No
2. ***We do not accept cash!*** Have you attached a certified check, cashier's check or money order, Payable to: Kentucky State Treasurer for the license fee? ☐ Yes ☐ No
3. Have you signed and had your application notarized? ☐ Yes ☐ No
4. Have you attached proof that you have properly qualified to operate in Kentucky? ☐ Yes ☐ No
(You must attach a copy of your certificate of authority to transport as a common carrier issued by the Department of Transportation Federal Motor Carrier Safety Administration and authorization to operate in Kentucky issued by the Interstate Commerce Commission. Kentucky Department of Transportation, Division of Motor carriers will assist you with this requirement by calling (502) 564-4540.

You may now forward this application schedule, all attachments, and your state license fee to:

*Commonwealth of Kentucky
Dept. of Alcoholic Beverage Control
1003 Twilight Trail
Frankfort, Kentucky 40601-8400*

*Telephone (502) 564-4850
Fax (502) 564-1442
<http://abc.ky.gov>*

REMINDERS

- KRS 243.200 Business authorized by distilled spirits and wine transporter's license. (To transport distilled spirits and wine to or from licensed premises if both the consignor and consignee in each case are authorized by the law of the states of their resident to sell, purchase, ship or receive.). (You must have proper certificates from the Commonwealth of Kentucky Department of Vehicle Regulation to engage in the business of a common carrier.). *(For TS applicants).*
- KRS 243.210 Business authorized by a malt beverage transporter's license. (To transport malt beverages to or from licensed premises if both the consignor and consignee in each case are authorized by the law of the states of their resident to sell, purchase, ship or receive.). (You must have proper certificates from the Commonwealth of Kentucky Department of Vehicle Regulation to engage in the business of a common carrier.). *(For MT applicants).*
- KRS 244.150 Licensee to keep records – Common carriers to furnish information. (You must maintain and make readily available upon request adequate books and records of all transactions of shipments of alcoholic beverages to, from, or between persons in Kentucky.). *(For all applicants).*
- 804 KAR 8:010 Common Carrier (distilled spirits and wine.) (Common carriers can only transport distilled spirits and wine over the same routes as those authorized to the carrier by the Transportation Cabinet.). *(For TS applicants).*
- 804 KAR 8:020 Transporters' license (distilled spirits and wine.) *(For TS applicants).*
- 804 KAR 8:050 Signs on vehicles used by distilled spirits, wine and malt beverage transporters. (Uniform letters in contrasting colors on the right and left side of the vehicle paint the name of the licensee, the Kentucky ABC license type, and the Kentucky ABC license numbers. *(Required for all vehicles transporting alcoholic beverages).*

You may contact our office (502) 564-4850 to obtain full copies of these laws and regulations or obtain copies from Kentucky's Legislation Research Commission Web Site.

<http://www.lrc.ky.us>

All Kentucky Statutes

<http://www.lrc.ky.gov/kar/TITLE804.HTM>

Ky. ABC Regulations

<http://www.lrc.state.ky.us/KRS/241-00/CHAPTER.HTM>

Ky. ABC Statutes definitions & authority

<http://www.lrc.state.ky.us/KRS/242-00/CHAPTER.HTM>

Ky. ABC Statutes local option

<http://www.lrc.state.ky.us/KRS/243-00/CHAPTER.HTM>

Ky. ABC Statutes licensing and taxes

<http://www.lrc.state.ky.us/KRS/244-00/CHAPTER.HTM>

Ky. ABC statutes requirements and prohibitions

KY ABC-Remittance Form
January 19, 2010

Commonwealth of Kentucky
Dept. of Alcoholic Beverage Control
1003 Twilight Tr.
Frankfort, Ky. 40601-8400
<http://abc.ky.gov/>

(502) 564-4850 Phone
(502) 564-1442 Fax

If you are making payment with a credit card or by EFT please provide the following information.

Print Name (as it appears on credit card) _____ Telephone No. _____

Billing Address _____

Account Number _____ Expiration Date (Month and Year) _____

Check your method of payment

AMOUNT \$ _____.

☐ Visa

☐ MasterCard

☐ Discover

☐ EFT (Bank Name) _____, (Routing #) | : _ _ _ _ _ | : (Checking Account #) _ _ _ _ _ | :

Reason for your payment

☐ ABC Licensing ☐ STAR Training ☐ ABC Fine ☐ Tobacco Fine ☐ Open Records Request

Credit or apply this payment to: (Name) _____ (DBA) _____

Site I.D.# _____. License # _____ (Phone) (_____) _____ - _____.